

Application Data Sheet

Application Information

Application number::
Filing Date::
Application Type:: Regular
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD disks::
Number of copies of CDs::
Sequence submission?::
Computer Readable Form (CRF)?::
Number of copies of CRF::
Title:: Needle Cannula Removal By Extraction
Attorney Docket Number:: 000717.00010
Request for Early Publication?:: NO
Request for Non-Publication?:: NO
Suggested Drawing Figure:: 4
Total Drawing Sheets:: 19
Small Entity?:: YES
Latin name::
Variety denomination name::
Petition included?:: NO
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers::
Secrecy Order in Parent Appl.?:: NO

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Roger
Middle Name:: L.
Family Name:: Hildwein
Name Suffix::
City of Residence:: Woodinville
State or Province of Residence:: WA
Country of Residence::
Street of mailing address:: 14030 Bear Creek NE,
City of mailing address:: Woodinville
State or Province of mailing address:: WA
Country of mailing address::
Postal or Zip Code of mailing address:: 98072

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: William
Middle Name:: Robert
Family Name:: Van Lew
Name Suffix:: Jr.
City of Residence:: Renton
State or Province of Residence:: WA
Country of Residence::
Street of mailing address:: 17735 105th Pl. SE, Apt. J304
City of mailing address:: Renton

State or Province of mailing address:: WA
Country of mailing address::
Postal or Zip Code of mailing address:: 98055

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Glenn
Middle Name:: D.
Family Name:: Austin
Name Suffix::
City of Residence:: Seattle
State or Province of Residence:: WA
Country of Residence::
Street of mailing address:: 11050 Palatine Ave. N.

City of mailing address:: Seattle
State or Province of mailing address:: WA
Country of mailing address::
Postal or Zip Code of mailing address:: 98133

Correspondence Information

Correspondence Customer Number:: 22907

Representative Information

Representative Customer Number:: 22907

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Non-Provisional of	60/268,883	02/16/01
This Application	Non-Provisional of	60/294,004	05/30/01

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name:: PATH
1455 N.W. Leary Way
Street of mailing address::
City of mailing address:: Seattle
State or Province of mailing address:: Washington
Country of mailing address::
Postal or Zip Code of mailing address:: 98107